

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000022774

Entity Name: CALPHIL ASSOCIATES L.L.C.

FILED
Oct 24, 2006
Secretary of State

Current Principal Place of Business:

16450 S. TAMiami TRAIL
UNITS 10 & 11
FORT MYERS, FL 33908 US

New Principal Place of Business:

Current Mailing Address:

16450 S. TAMiami TRAIL
UNITS 10 & 11
FORT MYERS, FL 33908 US

New Mailing Address:

FEI Number: 56-2503805 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

EIHAUSEN, DERRICK S
1625 HENDRY STREET
SUITE 301
FORT MYERS, FL 33901 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: DERRICK EIHAUSEN

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: NOTARO, PHIL JR.
Address: ONE CROSS ISLAND PLAZA, SUITE 111B
City-St-Zip: ROSEDALE, NY 11422

Title: MGRM () Delete
Name: CHOY, CALVIN
Address: 16450 S. TAMiami TRAIL, UNITS 10 & 11
City-St-Zip: FORT MYERS, FL 33908 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: NOTARO, PHILIP JR.
Address: 83-19 101ST AVENUE , SUITE# 2FT
City-St-Zip: OZONE PARK, NY 11416 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: PHILIP NOTARO JR

MGRM

10/24/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date